

**HIV/STD CLINICAL RESOURCES DIVISION
BUREAU OF HIV AND STD PREVENTION**

RISK ASSESSMENT OF GRANTEES AND OR SUB RECIPIENTS

POLICY:

HIV/STD Clinical Resources Division (CRD) clinical staff will conduct risk assessments after each monitoring or investigative site visit on all grantees and sub recipients that provide clinical and or case management services.

PURPOSE:

To provide a consistent mechanism to identify and document grantees and sub recipients most at risk of failing to meet program standards; thereby potentially jeopardizing the clients they serve. It provides for a systematic way of prioritizing the on-site monitoring visits.

PROCEDURES:

1. HIV/STD CRD clinical staff complete the risk assessment tool after each monitoring or investigative site visit to prioritize future on-site monitoring visits to that grantee or sub recipient. The risk assessment should be completed by utilizing information from historical site visit reports, quarterly reports, request for proposals (RFPs), technical assistance reports, reports from the regional staff, and the most recent on-site monitoring visit. Grantees or sub recipients who have not previously been monitored by CRD staff will be rated as **Priority I** (see below), and will be visited accordingly.
2. Place a check mark in the "true" column if the statement is correct. Place a check mark in the "false" column if the statement is not correct. The area titled "N/A" should be marked when the statement does not apply to the contractor/provider being assessed. All areas of the tool should be completed.
3. After a tool has been completed for a grantee or sub recipient, the grantee or sub recipient should be ranked as follows:
 - a. Any grantee whose tool contains a check mark in the area titled "False" and **where the statement is marked by an asterisk**, is considered to be at risk for providing substandard care and therefore is considered a **Priority I**. This grantee should be visited as soon as possible and within the current calendar year.
 - b. Any grantee whose tool contains 20% or more of the statements marked in the "False" column, is considered a **Priority II**. This contractor/provider should be visited within the next 12 months.
 - c. All other grantees not meeting the above criteria, are considered a **Priority III**. These contractors should be visited on a regular schedule and may not require a monitoring visit for up to two years.
4. Once the CRD clinical staff has completed prioritization of the grantee, a monitoring schedule can be developed for the next site visit. Information from the risk assessment will be used to develop and maintain a tentative site visit schedule for the CRD.
5. The completed Contractor Risk Assessment tool and site visit report will be forwarded to the Assistant Division Director for review and approval.

By following the procedures outlined above, knowledgeable decisions can be made regarding travel for on-site monitoring visits versus the use of resources for training and technical assistance needs. It promotes the scheduling of site monitoring visits in an efficient and cost effective manner and allows for coordination with other programs. See Contractor Risk Assessment Tool.

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Date:

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